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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Edward First name Christian Middle name Mccluskey Last name and Suffix (Sr., Jr., II, III)	Michelle First name Ann Middle name Mccluskey Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7169	xxx-xx-8485

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Debtor 1 Edward Christian Mccluskey
Debtor 2 Michelle Ann Mccluskey

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs				
5.	Where you live	454.1	If Debtor 2 lives at a different address:				
		151a Inverness Court Elk Grove Village, IL 60007 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Cook County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one: Over the last 180 days before filing this petition, I				
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Edward Christian Mccluskey Debtor 1 Debtor 2 Michelle Ann Mccluskey Case number (if known) Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. Northern District of 9/02/07 08-14496 District Illinois When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Debtor Relationship to you When District Case number, if known Do you rent your Go to line 12. ■ No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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Debtor 1 Edward Christian Mccluskey

Deb	otor 2 Michelle Ann Mcc	luskey			Case number (if known)	
Par	Report About Any Bu	ısinesses	You Owr	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	to Part 4.		
		☐ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, Sta	te & ZIP Code	
	it to this petition.		Chec	k the appropriate bo	x to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	9	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor so to deadlines. If you indicate that you are a small business debtor, you must attach your most recent ball business debtor, you must attach your most recent ball operations, cash-flow statement, and federal income tax return or if any of these documents do not expect the properties of the court must know whether you are a small business debtor, you must attach your most recent ball operations, cash-flow statement, and federal income tax return or if any of these documents do not expect the properties of the court must know whether you are a small business debtor so the properties of the court must know whether you are a small business debtor so the properties of				a small business debtor, you must attach your most recent balance sheet, statement of		
	For a definition of small	■ No.	I am i	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am i	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	· Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to public health or safety?	□ 165.	What is	the hazard?		
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number Cheet City Chate 9 7in Code	
					Number, Street, City, State & Zip Code	

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Debtor 1 Edward Christian Mccluskey
Debtor 2 Michelle Ann Mccluskey

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-32297 Doc 1 Filed 10/10/16 Entered 10/10/16 15:46:43 Desc Main Document Page 6 of 57

	otor 1 otor 2	Edward Christian Michelle Ann Mcc		ey			umber (if known)			
Par	t 6:	Answer These Questi	ions for R	eporting Purposes						
16.		t kind of debts do have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by individual primarily for a personal, family, or household purpose."						
				☐ No. Go to line 16b.						
				Yes. Go to line 17.						
			16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
				☐ No. Go to line 16c.						
				☐ Yes. Go to line 17.						
			16c.	State the type of debts yo	ou owe that are not consur	mer debts or bu	siness debts			
17.		you filing under oter 7?	□ No.	I am not filing under Chap	pter 7. Go to line 18.					
	after	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	■ Yes.		7. Do you estimate that af e available to distribute to		property is excluded and a litors?	administrative expenses		
				■ No						
be dis	be a			☐ Yes						
		How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000	ı	2 5,001-50,0	00		
			□ 50-99	ı	5001-10,000		□ 50,001-100,			
			□ 100-1 □ 200-9		☐ 10,001-25,0	,001-25,000 LI Mo		Nore than100,000		
19.		much do you	\$0 - \$	550,000	□ \$1,000,001	- \$10 million	□ \$500,000,00)1 - \$1 billion		
		nate your assets to orth?	□ \$50,0	01 - \$100,000	\$10,000,001			001 - \$10 billion		
				001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00),001 - \$50 billion 50 billion		
			— \$500,			***************************************				
20.		much do you nate your liabilities	\$0 - \$	50,000	<u> </u>		\$500,000,00			
	to be			001 - \$100,000	□ \$10,000,001 □ \$50,000,001			,001 - \$10 billion 0,001 - \$50 billion		
			□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$100,000,001					
Par	t 7:	Sign Below								
For	you		I have ex	camined this petition, and I	declare under penalty of p	perjury that the i	information provided is true	e and correct.		
				chosen to file under Chapt tates Code. I understand th						
				rney represents me and I ont, I have obtained and read				ne fill out this		
			I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
				understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a pankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571						
				ard Christian Mcclusk			Ann Mccluskey			
				I Christian Mccluskey e of Debtor 1		Signature of D	n Mccluskey Debtor 2			
			Executed	d on October 10, 2016	<u> </u>	Executed on	October 10, 2016			

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Debtor 1	Edward Christian Mccluskey
Debtor 2	Michelle Ann Mccluskey

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert M. Kaplan	Date	October 10, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Robert M. Kaplan Printed name		
Law Offices of Robert M. Kaplan, P.C.		
1535 W. Schaumburg Road Suite 204		
Schaumburg, IL 60194		
Number, Street, City, State & ZIP Code		
Contact phone (847)895-9151	Email address	rmkap@sbcglobal.net
6206215		
Bar number & State		

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		17(7(.1)111	<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Edward Christian	Mccluskey		
	First Name	Middle Name	Last Name	
Debtor 2	Michelle Ann Mc	cluskey		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				Charle if this is an
(II KIIOWII)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your as Value o	ssets of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,149.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	8,149.00
rt 2: Summarize Your Liabilities		
		abilities t you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	825.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	29,056.00
Your total liabilities	\$	29,881.00
rt 3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,805.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,964.00
rt 4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
■ Yes What kind of debt do you have?		
	1a. Copy line 55, Total real estate, from Schedule A/B	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Edward Christian Mccluskey
Michelle Ann Mccluskey

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,216.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	825.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	825.00

Ca	se 16-32297	Doc 1	Filed 10/10/16	Entered 10/10/1	.6 15:46:43	Desc	Main
Fill in this inforn	nation to identify you	r case and		FAUE TO ULST			
Debtor 1	Edward Christia	n Mcclusi	key				
D 1 4 0	First Name	Mid	dle Name	Last Name			
Debtor 2 (Spouse, if filing)	Michelle Ann Mo		dle Name	Last Name			
United States Bar	nkruptcy Court for the:	NORTHE	RN DISTRICT OF ILLII	NOIS			
	mapley Court for the						
Case number _				_			Check if this is an amended filing
	was 400 A /D						
_	rm 106A/B	_					
Schedul	e A/B: Pro _l	certy					12/15
nformation. If more Answer every ques	e space is needed, attac tion.	h a separate	sheet to this form. On th	e are filing together, both are e top of any additional page: vn or Have an Interest In	s, write your name a	nd case nu	mber (if known).
. Do you own or h	ave any legal or equitab	le interest ir	n any residence, building	land, or similar property?			
■ No. Go to Part	2.						
☐ Yes. Where is	s the property?						
Dord 2. Doggriba	Your Vehicles						
Part 2: Describe	rour venicles						
				whether they are register xecutory Contracts and Un		any vehic	les you own that
	•			nocatory contracte and on	oxpirou zoucoc.		
o. Cars, vans, tru	ıcks, tractors, sport ι	itility venic	les, motorcycles				
□ No							
Yes							
_	Γοyota Corolla		Who has an interest in th ☐ Debtor 1 only	e property? Check one	the amount of an	y secured cla	or exemptions. Put aims on <i>Schedule D:</i> Secured by Property.
Year:	2005		■ Debtor 2 only		Current value of		urrent value of the
Approximate	e mileage: 111		Debtor 1 and Debtor 2	only	entire property?		ortion you own?
Other inform	nation:		At least one of the debt	ors and another			
			Check if this is comm (see instructions)	unity property	\$5,50	0.00	\$5,500.00
Examples: Boat				cles, other vehicles, and lowmobiles, motorcycle acc			
■ No							
☐ Yes							
				om Part 2, including any			\$5,500.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Entered 10/10/16 15:46:43 Document Page 11 of 57 **Edward Christian Mccluskey** Debtor 1 Debtor 2 Michelle Ann Mccluskey Case number (if known) 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$1,600.00 household goods and furnishings 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$200.00 Electronics: flat screen tv 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$600.00 necessary wearing apparel Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,400.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Desc Main

Case 16-32297

Doc 1

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Debtor 1 Debtor 2	Edward Christian Michelle Ann Mcclu		Case number (if known)	
				Do not deduct secured claims or exemptions.
■ No	oles: Money you have in y	-	nome, in a safe deposit box, and on hand when you file your petition	1
			counts; certificates of deposit; shares in credit unions, brokerage ho ts with the same institution, list each.	uses, and other similar
□ No ■ Yes			Institution name:	
	17.1.	checking	Healthcare Associates Credit Union	\$244.00
	17.2.	savings	Healthcare Associates Credit Union	<u>\$5.00</u>
	, mutual funds, or publi		rokerage firms, money market accounts	
■ No		Institution or issue		
joint vo ■ No	enture Give specific information	about them		in an LLC, partnership, an
20 Govern		ame of entity:	% of ownership:	
Negotia	able instruments include	personal checks, ca	ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
☐ Yes.	Give specific information Iss	about them suer name:		
	nent or pension accour oles: Interests in IRA, ER		403(b), thrift savings accounts, or other pension or profit-sharing plants	ans
	List each account separa Type	ately. of account:	Institution name:	
Your sl Examp		its you have made s	so that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications companie	es, or others
■ No □ Yes.			Institution name or individual:	
23. Annuiti	ies (A contract for a perio	odic payment of mor	ney to you, either for life or for a number of years)	
☐ Yes	lssuer nar	ne and description.		
26 U.S.0	s in an education IRA, C. §§ 530(b)(1), 529A(b),		qualified ABLE program, or under a qualified state tuition prog	ram.
■ No □ Yes	Institution	name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
25. Trusts , ■ No	equitable or future into	erests in property (other than anything listed in line 1), and rights or powers exerc	cisable for your benefit
	Give specific information	about them		

Official Form 106A/B Schedule A/B: Property page 3

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Debtor 1 Debtor 2				· ·	ase number (if known)	
Exa. ■ No	nts, copyrights, trademarks, tmples: Internet domain names, s. Give specific information abo	websites, p			s	
27. Lice :	nses, franchises, and other gomples: Building permits, exclusi	eneral inta		n holdings, liquor license	es, professional licens	es
☐ Ye	s. Give specific information abo	out them				
Money o	or property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	refunds owed to you s. Give specific information abo	out them, in	cluding whether you alre	ady filed the returns and	d the tax years	
		esti	mated 2015 tax refun	ıd	federal	\$0.00
Exa. No Ye 30. Other Exa. No Ye	s. Give specific information r amounts someone owes yo mples: Unpaid wages, disability benefits; unpaid loans you s. Give specific information ests in insurance policies	u insurance ou made to	payments, disability bend someone else	efits, sick pay, vacation	pay, workers' comper	nsation, Social Security
Exa. ■ No	mples: Health, disability, or life i	insurance;	health savings account (I	HSA); credit, homeowne	er's, or renter's insurar	nce
☐ Ye	s. Name the insurance compan Compa	y of each p any name:	olicy and list its value.	Beneficiary	/ :	Surrender or refund value:
If yo som	interest in property that is du u are the beneficiary of a living eone has died. s. Give specific information				urrently entitled to rece	eive property because
Exa. ■ No	ns against third parties, whet mples: Accidents, employment of states. S. Describe each claim				or payment	
■ No	r contingent and unliquidated s. Describe each claim	d claims of	every nature, including	g counterclaims of the	edebtor and rights to	set off claims
■ No	financial assets you did not a s. Give specific information	Iready list				

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Debtor Debtor			Case number (if known)	
	dd the dollar value of all of your entries from Part 4, including pr Part 4. Write that number here			\$249.00
Part 5:	Describe Any Business-Related Property You Own or Have an Intere	st In. List any real esta	ate in Part 1.	
37. Do y	you own or have any legal or equitable interest in any business-related	d property?		
■ No	p. Go to Part 6.			
☐ Ye	es. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You of If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do	you own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
Ex ■ N	you have other property of any kind you did not already list? kamples: Season tickets, country club membership No Yes. Give specific information			
54. A	dd the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. P	art 1: Total real estate, line 2		<u> </u>	\$0.00
56. P	art 2: Total vehicles, line 5	\$5,500.00		
57. P	art 3: Total personal and household items, line 15	\$2,400.00		
58. P	art 4: Total financial assets, line 36	\$249.00		
	art 5: Total business-related property, line 45	\$0.00		
60. P	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. P	art 7: Total other property not listed, line 54 +	\$0.00		
62. T	otal personal property. Add lines 56 through 61	\$8,149.00	Copy personal property total	\$8,149.00
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			\$8,149.00

Official Form 106A/B Schedule A/B: Property page 5

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		IAAAIII		
Fill in this infor	mation to identify your	case:		
Debtor 1	Edward Christian	Mccluskey		
	First Name	Middle Name	Last Name	
Debtor 2	Michelle Ann Mc	cluskey		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				Charle William
(II KIIOWII)				Check if this is

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1	Which set of exemptions are	vou claiming? Ch د	ack one only even if	Vour enquee is filing with you

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2005 Toyota Corolla 111,000 miles Line from Schedule A/B: 3.1	\$5,500.00		\$2,400.00	735 ILCS 5/12-1001(c)
Ellie Holli Geriedale 742. G.1			100% of fair market value, up to any applicable statutory limit	
2005 Toyota Corolla 111,000 miles Line from Schedule A/B: 3.1	\$5,500.00		\$3,100.00	735 ILCS 5/12-1001(b)
LINE HOLL SCHEDULE PAB. 3.1			100% of fair market value, up to any applicable statutory limit	
household goods and furnishings Line from Schedule A/B: 6.1	\$1,600.00		\$1,600.00	735 ILCS 5/12-1001(b)
Line non schedule A/D. 4.1			100% of fair market value, up to any applicable statutory limit	
Electronics: flat screen tv Line from Schedule A/B: 7.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
LITE HOLL SCHEDULE PAB. 1.1			100% of fair market value, up to any applicable statutory limit	
necessary wearing apparel	\$600.00		\$600.00	735 ILCS 5/12-1001(a)
LINE HOIN SCHEUUIE PVD. 11.1			100% of fair market value, up to any applicable statutory limit	

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Michelle Ann Mccluskey Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B checking: Healthcare Associates 735 ILCS 5/12-1001(b) \$244.00 \$244.00 **Credit Union** 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit savings: Healthcare Associates 735 ILCS 5/12-1001(b) \$5.00 \$5.00 **Credit Union** 100% of fair market value, up to Line from Schedule A/B: 17.2 any applicable statutory limit federal: estimated 2015 tax refund 735 ILCS 5/12-1001(b) \$0.00 \$1,500.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

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		17(7(1))))		
Fill in this inform	mation to identify your	case:		
Debtor 1	Edward Christian	n Mccluskey		
	First Name	Middle Name	Last Name	
Debtor 2	Michelle Ann Mc	cluskey		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Document Page 18 of 57 Fill in this information to identify your case: Debtor 1 **Edward Christian Mccluskey** Last Name Debtor 2 Michelle Ann Mccluskev Middle Name Last Name (Spouse if, filing) First Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim Priority** Nonpriority amount amount 2.1 Illinois Dept of Revenue Last 4 digits of account number \$557.00 \$0.00 \$557.00 Priority Creditor's Name When was the debt incurred? 04/15/2013 Springfield, IL 62726-0001 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ☐ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes did not file until 2016 2.2 Illinois Dept of Revenue Last 4 digits of account number \$268.00 \$0.00 \$268.00 Priority Creditor's Name When was the debt incurred? 04/15/2013 Springfield, IL 62726-0001 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ■ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No

☐ Yes

☐ Other. Specify

did not filed until 2016

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	or 1 Edward Christian Mccluskey Michelle Ann Mccluskey		Case number (if know)			
Part	2: List All of Your NONPRIORITY Unsecu	red Claims				
	Oo any creditors have nonpriority unsecured claims					
_	□ No. You have nothing to report in this part. Submit t	•	dulos			
_		this form to the court with your other sche	dules.			
	Yes.					
t	List all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each clahan one creditor holds a particular claim, list the other art 2.	aim. For each claim listed, identify what ty	pe of claim it is. Do not list claims already inc	luded in Part 1. If more		
				Total claim		
4.1	Advanced Radiology Consultants	Last 4 digits of account number	5411	\$67.00		
	Nonpriority Creditor's Name			Ψ01.00		
	520 E. 22nd Street	When was the debt incurred?	09/5/2015	_		
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Chack all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim is	S. Officer all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans				
	☐ Check if this claim is for a community					
	debt	_	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	adion agreement of diverse that you are not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify medical ser	vices	-		
	Advocate Lutheran General					
4.2	Hospital	Last 4 digits of account number	2877	\$300.00		
	Nonpriority Creditor's Name PO Box 4249	When was the debt incurred?	12/2/2014			
	Carol Stream, IL 60197	When was the dest meaned?	12/2/2017	-		
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	- •			
	☐ Yes	Other. Specify medical ser	vices			

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	Edward Christian Mccluskey Michelle Ann Mccluskey		Case number (if know)	
4.3 I	Advocate Lutheran General Hospital	Last 4 digits of account number	8464	\$87.00
F	Nonpriority Creditor's Name PO Box 73208	When was the debt incurred?	12/15/2014	
1	Chicago, IL 60673 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	□ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
]] o	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt		d claim: aration agreement or divorce that you did not	
_	s the claim subject to offset? No	report as priority claims Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other Specify notice only	<u>'</u>	
	Advocate Medical Group	Last 4 digits of account number	1752	\$300.00
F	Nonpriority Creditor's Name PO Box 92523	When was the debt incurred?	05/12/2012	
1	Chicago, IL 60675-2523 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
_	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
[c	☐ Debtor Fand Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt s the claim subject to offset?	Type of NONPRIORITY unsecure	d claim: aration agreement or divorce that you did not	
I	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
[☐Yes	Other. Specify er visit		
	Alexian Bros Medical Center	Last 4 digits of account number	4345	\$3,396.00
8 8	Nonpriority Creditor's Name attn: Billing Dept 300 Biesterfield Elk Grove Village, IL 60007	When was the debt incurred?	01/1/2015	
1	Number Street City State Zlp Code Nho incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
[Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
c	☐ Check if this claim is for a community debt sthe claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
_	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	⊒ Yes	Other. Specify admitted to	= :	

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Edward Christian Mccluskey Michelle Ann Mccluskey		Case number (if know)		
Alexian Brothers Behavioral Hosp	Last 4 digits of account number	1187	\$196.00	
Nonpriority Creditor's Name 21272 Network Place Chicago, IL 60673	When was the debt incurred?	06/5/2014		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
☐ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharing	g plans, and other similar debts		
Yes	Other. Specify admitted to	hosp		
Alexian Brothers Medical Center Nonpriority Creditor's Name	Last 4 digits of account number	5813	\$127.00	
22589 Network Place Chicago, IL 60673	When was the debt incurred?	06/5/2014		
Number Street City State Zlp Code	As of the date you file, the claim			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharing			
Yes	■ Other. Specify admitted to hospital			
Alexian Brothers Medical Group	Last 4 digits of account number	8022	\$33.00	
Nonpriority Creditor's Name PO Box 740023 Cincinnati, OH 45274	When was the debt incurred?			
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharing	g plans, and other similar debts		
☐ Yes	Other. Specify er visit			

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Debtor 1 Edward Christian Mccluskey

Deb	tor 2 Michelle Ann Mccluskey		Case number (if know)	
4.9	Alexian Brothers Medical Group	Last 4 digits of account number	a380	\$78.00
	Nonpriority Creditor's Name 3040 Salt Creek Lane Arlington Heights, IL 60005	When was the debt incurred?	01/9/2015	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	og plans, and other similar debts	
	☐ Yes	■ Other. Specify office visit	g plans, and other similar debts	
4.4	1			
4.1 0	Alexian Brothers Medical Group Nonpriority Creditor's Name	Last 4 digits of account number	8022	\$1,200.00
	Attn: #5588Y PO Box 14000	When was the debt incurred?	10/31/2015	
	Belfast, MO 04915	_		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	☐ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify er visit		
4.1 1	Ameri Mark Premier	Last 4 digits of account number	X804	\$341.00
	Nonpriority Creditor's Name		Date Opened: 07/13/2010 Last	
	PO Box 2845 Monroe, WI 53566	When was the debt incurred?	Used: 01/20/2013	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
	* *	— Outor. Opeony		

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Debtor 1 Edward Christian Mccluskey

Debto	Michelle Ann Mccluskey		Case number (if know)				
4.1	Apex Northwest Healthcare SC	Last 4 digits of account number	0233	\$212.00			
	Nonpriority Creditor's Name 1558 Barrington Road Doctors Building 1, Suite 410	When was the debt incurred?	10/30/2015				
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify hospital ad					
4.1	Behavior Healthcare	Last 4 digits of account number	bhca	\$123.00			
	Nonpriority Creditor's Name 1375 E Schaumburg	When was the debt incurred?	05/8/2013				
	Suite 260 Schaumburg, IL 60194 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharin	a plans, and other similar debts				
	☐ Yes	Other. Specify office visit	g plans, and other similar debts				
4.1	Credit Bureau Centre Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00			
	PO Box 273 Monroe, WI 53566	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharin					
	☐ Yes	Other. Specify notice only					

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Debtor 1 Edward Christian Mccluskey Debtor 2 Michelle Ann Mccluskey Case number (if know) 4.1 **Credit One Bank** \$0.00 Last 4 digits of account number 5 Nonpriority Creditor's Name PO Box 60500 When was the debt incurred? City of Industry, CA 91716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify notice only 4.1 **Credit One Bank** \$850.00 Last 4 digits of account number 6 Nonpriority Creditor's Name c/o Blatt Hasenmiller Leibsker Moor When was the debt incurred? 10 S LaSalle St, Suite 2200 Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify revolving account ☐ Yes 4.1 Elk Grove Radiology 8385 \$171.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Billing Dept When was the debt incurred? 06/2/2010 800 Biesterfield Elk Grove Village, IL 60007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify er visit

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Debtor 1 Edward Christian Mccluskey

Debt	or 2 Michelle Ann Mccluskey		Case number (if know)						
4.1	First Investors Servicing Corp			\$20,141.00					
8	Nonpriority Creditor's Name	Last 4 digits of account number		\$20,141.00					
	c/o Markoff Law LLC	When was the debt incurred?							
	29 N Wacker Drive, Ste 550								
	Chicago, IL 60606	As of the data way file the elector	in Ohada II shasana						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	_								
	Debtor 2 only Unliquidated								
	Debtor 1 and Debtor 2 only	Disputed	d alabas						
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d Claim:						
	☐ Check if this claim is for a community debt								
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts						
		_ notice only	,						
	☐ Yes	Other. Specify repossesses	ed vehicle						
4.1 9	Gettington	Last 4 digits of account number	0914	\$216.00					
	Nonpriority Creditor's Name	_	Data Onesa de 04/4/0044 l ant						
	PO Box 166	When was the debt incurred?	Date Opened: 01/4/2011 Last Used: 06/14/2012						
	Newark, NJ 07101	when was the dest meaned?	OSCU. 00/14/2012						
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply						
	Who incurred the debt? Check one.	_							
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	■ Debtor 1 and Debtor 2 only	☐ Disputed							
	\square At least one of the debtors and another								
	☐ Check if this claim is for a community	is claim is for a community							
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not						
	No	Debts to pension or profit-sharing	on plans, and other similar debts						
			g plane, and other emiliar debte						
	Yes	Other. Specify							
4.2	Crandnainta		1600	¢426.00					
0	Grandpointe Nonpriority Creditor's Name	Last 4 digits of account number		\$126.00					
	PO Box 8939	When was the debt incurred?	10/13/2010						
	Madison, WI 53708 Number Street City State Zlp Code	As of the date you file, the claim	in Charle all that apply						
	Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан шасарру						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	-							
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated							
	•	☐ Disputed Type of NONPRIORITY unsecure							
	At least one of the debtors and another	Student loans							
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims	manon agreement of divorce that you did flot						
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts						
	☐ Yes	Other. Specify							
		- Other. Specify							

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Debtor 2 Michelle Ann Mccluskey Case number (if know) 4.2 Harris & Harris \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 111 W. Jackson Blvd. When was the debt incurred? #400 Chicago, IL 60604 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 **Illinois Collection Service** \$0.00 Last 4 digits of account number 2 Nonpriority Creditor's Name PO Box 1010 When was the debt incurred? Tinley Park, IL 60477 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify notice only ☐ Yes 4.2 Malcolm S. Gerard & Assoc, Inc \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 332 S. Michigan Ave., Suite 600 When was the debt incurred? Chicago, IL 60604 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify notice only ☐ Yes

Debtor 1 Edward Christian Mccluskey

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Debtor 1 Edward Christian Mccluskey

Debto	Michelle Ann Mccluskey		Case number (if know)					
4.2	Mason Companies Nonpriority Creditor's Name	Last 4 digits of account number	8941	\$292.00				
	2700 Meridian Parkway, Suite 200 Durham, NC 27713 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	Date Opened: 01/1/2009 Last Used: 10/15/2010 is: Check all that apply					
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes							
4.2	Mathers Clinic	Last 4 digits of account number	6786	\$56.00				
	Nonpriority Creditor's Name 145 S Virginia Street Crystal Lake, IL 60014	When was the debt incurred?						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	No	Debts to pension or profit-sharing						
	Yes	Other. Specify behavioral health services						
4.2	Mea-Elk Grove, LLC Nonpriority Creditor's Name	Last 4 digits of account number	8022	\$200.00				
	PO Box 740023 Cincinnati, OH 45274	When was the debt incurred?						
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	☐ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	□Yes	■ Other. Specify emergency	room					
		J Speakly						

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Debtor 2 Michelle Ann Mccluskey Case number (if know) 4.2 **Northwest Community Hospital** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 95698 When was the debt incurred? Chicago, IL 60694-5698 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify notice only 4.2 **Professional Recovery Services Inc** \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 221 Laurel Road When was the debt incurred? Suite 160 Voorhees, NJ 08043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify notice only ☐ Yes 4.2 **State Collection Services** \$0.00 Last 4 digits of account number 9 Nonpriority Creditor's Name PO Box 6250 When was the debt incurred? Madison, WI 53701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify notice only ☐ Yes

Debtor 1 Edward Christian Mccluskey

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Debtor 1 Debtor 2		Christian Mccluskey Ann Mccluskey		Case r	number (_{if}	know)		
4.3 0	Stoneberry		Last 4 digits of account number	4286			\$544.00	
	Ionpriority Cred	ditor's Name				_		
F	O Box 282	20				d: 01/11/2009 Last		
	lonroe, WI	-	When was the debt incurred?	Used	l: 12/12/	2011	_	
		City State Zlp Code	As of the date you file, the claim	is: Check	k all that ap	pply		
v	Vho incurred t	the debt? Check one.						
	Debtor 1 onl	у	☐ Contingent					
	Debtor 2 onl	у	☐ Unliquidated					
	Debtor 1 and	d Debtor 2 only	□ Disputed					
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
		s claim is for a community	☐ Student loans					
	ebt	s ciaini is ioi a community	☐ Obligations arising out of a sepa	aration ac	reement o	r divorce that you did not		
Is the claim subject to offset? ■ No			report as priority claims		,	,		
			Debts to pension or profit-sharing	ng plans,	and other	similar debts		
	Yes		Other. Specify				_	
10								
		dit Corporation	Last 4 digits of account number			_	\$0.00	
	Ionpriority Cred		When was the debt incurred?					
1350 E. Touhy Des Plaines, IL 60018			when was the debt incurred?				-	
		City State Zlp Code	As of the date you file, the claim					
v	Vho incurred t	the debt? Check one.						
	Debtor 1 onl	у	☐ Contingent					
	Debtor 2 onl	у	☐ Unliquidated					
	Debtor 1 and	d Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
_	_	of the debtors and another						
		s claim is for a community	☐ Student loans					
	ebt	s ciaini is ioi a community	☐ Obligations arising out of a sepa	aration ac	reement o	r divorce that you did not		
ls	the claim su	bject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts					
	No							
	Yes		Other. Specify notice only	,			_	
Dowt 2	List Oth and	a to Do Notified About a Dobt	That Var. Almandu Listad					
Part 3:		s to Be Notified About a Debt	·					
is trying have mo notified	to collect fro ore than one c for any debts	m you for a debt you owe to some reditor for any of the debts that in Parts 1 or 2, do not fill out or		Parts 1	or 2, then	list the collection agenc	y here. Similarly, if you	
Part 4:		mounts for Each Type of Uns						
	e amounts of unsecured cla		s. This information is for statistical r	eporting	purposes	s only. 28 U.S.C. §159. Ad	ld the amounts for each	
						Total Claim		
	6a.	Domestic support obligations		6a.	\$	0.00		
To clair							_	
from Par		Taxes and certain other debts	you owe the government	6b.	\$	825.00)	
	6c.	Claims for death or personal in	jury while you were intoxicated	6c.	\$	0.00	_	
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$	0.00		
	6e.	Total Priority Add lines 6a throu	ah 6d	6e.	•	925.00		
	oe.	Total Priority. Add lines 6a throu	gii ou.	oc.	\$	825.00		
						Total Claim		
_	6f.	Student loans		6f.	\$	0.00	<u></u>	
To clair from Par	ns	Obligations arising out of a se	paration agreement or divorce that	6g.	\$	0.00	•	
	~g.	J		- 9.	+	0.00	,	

Official Form 106 E/F

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Debtor 1
Debtor 2

Edward Christian Mccluskey

Michelle Ann Mccluskey

Case number (if know)

you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ 29,056.00

Official Form 106 E/F

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		I A A A H H H	111 1 11111. 31 (11 3)	
Fill in this infor	mation to identify your	case:		
Debtor 1	Edward Christian	n Mccluskey		
	First Name	Middle Name	Last Name	
Debtor 2	Michelle Ann Mc	cluskey		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this i

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 michael galladora
706 e shabonee
mount prospect, IL 60056

State what the contract or lease is for
yearly lease

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		Docume	nt Page 32 d	of 57
Fill in this in	formation to identify your	case:		
Debtor 1	Edward Christian	Meeluskov		
DODIOI 1	First Name	Middle Name	Last Name	
Debtor 2	Michelle Ann Mcc	luskey		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case numbe	r			
(if known)				☐ Check if this is an
				amended filing
Schedu		re also liable for any deb		12/15 as complete and accurate as possible. If two married
people are fil ill it out, and our name a	ling together, both are equal I number the entries in the nd case number (if known)	ally responsible for supp boxes on the left. Attach . Answer every question.	lying correct informat the Additional Page t	tion. If more space is needed, copy the Additional Page, to this page. On the top of any Additional Pages, write
1. Do yo	ou have any codebtors? (If y	you are filing a joint case, o	lo not list either spouse	e as a codebtor.
■ No □ Yes				
Arizona, No. G	n the last 8 years, have you California, Idaho, Louisiana, to to line 3. Did your spouse, former spou	Nevada, New Mexico, Pue	erto Rico, Texas, Wash	ry? (Community property states and territories include nington, and Wisconsin.)
in line 2	again as a codebtor only in again as a codebtor only in again as a codebtor only in again again again again ag	f that person is a guarant	or or cosigner. Make	r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to fi
	olumn 1: Your codebtor me, Number, Street, City, State and ZI	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
Na	me			Schedule E/F, line
				☐ Schedule C/F, line
				— Ochedule O, line
Nu Cit	mber Street y	State	ZIP Code	
3.2				☐ Schedule D, line
Na	me			☐ Schedule E/F, line
				☐ Schedule G, line
NI.	mhor Circoi			<u> </u>
Nu Cit	mber Street v	State	ZIP Code	

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							_				
Fill	in this information to ide	entify your ca	se:								
Deb	otor 1 <u>Ec</u>	lward Chri	stian Mccluskey								
	otor 2 Mi	chelle Ann	Mccluskey			_					
Unit	ted States Bankruptcy (Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS							
Cas (If kn	se number						Check if this An amen A supple 13 incom	ded filin	0		chapter
Of	fficial Form 10)6I					MM / DD	·		Ü	
Sc	chedule I: Yo	ur Inco	ome				WIWI 7 BB				12/15
supp spot	plying correct informa use. If you are separat ch a separate sheet to	tion. If you a ed and your this form. C	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your s th you, do not includ	spouse i de infori	s liv nati	ring with you, in on about your s	clude ir pouse.	nformation If more sp	n about y pace is n	your leeded,
1.	Fill in your employm	ent		Dahtand			Dobto	. 0	<i>t</i> ili		
	information.	ana iah		Debtor 1 ☐ Employed				Debtor 2 or non-filing spouse			
	If you have more than one jo attach a separate page with information about additional employers.	ge with	Employment status	■ Not employed				■ Employed□ Not employed			
		itionai	Occupation			secretary					
	Include part-time, sea	sonal, or							ıthoran (Conoral	
	self-employed work.		Employer's name					Advocate Lutheran General Hospital			
	Occupation may incluor homemaker, if it ap		Employer's address					1775 W Dempster Street Park Ridge, IL 60068			
			How long employed th	here?				28 yea	ars		
Par	t 2: Give Details	About Mon	thly Income								
	mate monthly income use unless you are sepa		te you file this form. If y	you have nothing to re	port for	any	line, write \$0 in t	ne space	e. Include y	your non	-filing
	u or your non-filing spou e space, attach a separa		re than one employer, co	ombine the information	n for all e	emplo	oyers for that pe	son on t	the lines be	elow. If y	ou need
							For Debtor 1		r Debtor 2 n-filing sp		
2.			y, and commissions (be alculate what the monthly		2.	\$	0.0	\$_	3,3	324.00	
3.	Estimate and list mo	nthly overti	me pay.		3.	+\$	0.0	+\$		0.00	
4.	Calculate gross Inco	ome. Add line	e 2 + line 3.		4.	\$	0.00	\$	3,324	1.00	

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Edward Christian Mccluskey Debtor 1 Michelle Ann Mccluskey Debtor 2 Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 0.00 3,324.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 0.00 481.00 5b. Mandatory contributions for retirement plans 5b. 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 0.00 5e. Insurance 5e. 0.00 485.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5q. **Union dues** 5g. 0.00 0.00 5h. Other deductions. Specify: TOBSUREE 5h.+ \$ 0.00 + \$ 98.00 **TOBSURSP** \$ 0.00 \$ 98.00 RE401K \$ 0.00 \$ 167.00 \$ **ACFDONAT** \$ 5.00 0.00 DISBUYUP 0.00 \$ 5.00 **HYATT LEGAL** 0.00 20.00 **OPTLF EE** 0.00 17.00 **OPTLF S** 0.00 24.00 UNILIFE 0.00 35.00 RSPLOAN1 0.00 24.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 1,459.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 0.00 1,865.00 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 0.00 0.00 8b. Interest and dividends 8b. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 940.00 0.00 Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 0.00 0.00 Pension or retirement income 8g. \$ 0.00 \$ 8g. 0.00 Other monthly income. Specify: 8h.+ 8h. \$ 0.00 \$ 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 940.00 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 940.00 + \$ 1.865.00 \$ 2.805.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 12. 2,805.00 applies Combined monthly income

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Debtor 1 Debtor 2	Edward Christi Michelle Ann M	•	Case number (if known)	
13. Do y	ou expect an incr	ease or decrease within the year after you file this form?		
	No.			
	Yes. Explain:			

Official Form 106I Schedule I: Your Income page 3

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Fill	in this informa	tion to identify yo	our case:					
Deb	tor 1	Edward Chri	istian Mc	cluskev		Che	eck if this is:	
				· · · · · · · · · · · · · · · · · · ·			An amended filing	
	otor 2	Michelle Anı	n Mcclus	key				wing postpetition chapter the following date:
(Spo	ouse, if filing)						13 expenses as or	the following date.
Unit	ed States Bankr	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
		J: Your	Evnor	1606				40/4/
				ISCS If two married people ar	e filing together b	oth are en	ually responsible fo	12/15
info	ormation. If m		eded, atta	ch another sheet to this				
Par	t 1: Descr	ribe Your House	ehold					
1.	Is this a joir	nt case?						
	☐ No. Go to	line 2.						
	Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N	О						
	□Y	es. Debtor 2 mu	st file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.	
0	D	- dd(-0	-					
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents							☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ No☐ Yes
3.	Do your exp	oenses include		No				□ 163
		f people other t	than _	Yes				
	yourself and	d your depende	nts?	1 103				
Par		ate Your Ongoi						
exp				uptcy filing date unless y ey is filed. If this is a supp				
				government assistance i				
	value of sucl ficial Form 10		d have inc	cluded it on <i>Schedule I:</i> \	our Income		Your exp	enses
•		•						
4.		or home owners and any rent for th		nses for your residence. In or lot.	nclude first mortgag	e 4.	\$	1,000.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.		25.00
				upkeep expenses		4c.		0.00
5		owner's associa		dominium dues our residence , such as ho	mo oquity loops	4d. 5.	· -	0.00
IJ.	AUUIIIUIIAI I	HULLUAUE DAVIII	enta lui Vi	JUL TESTUETICE, SUCH AS DO	me ennny 10ans		413	() ()()

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ebtor 2	9		
Debtor 2	2 Michelle Ann Mccluskey	Case number (if known)	
S. Uti	ilities:		
6a.		6a. \$	170.00
6b		6b. \$	39.00
6c.		6c. \$	200.00
6d	I. Other. Specify:	6d. \$	0.00
. Fo	ood and housekeeping supplies	7. \$	640.00
. Ch	nildcare and children's education costs	8. \$	0.00
. Clo	othing, laundry, and dry cleaning	9. \$	105.00
0. Pe	ersonal care products and services	10. \$	40.00
1. M e	edical and dental expenses	11. \$	400.00
	ansportation. Include gas, maintenance, bus or train fare.	12. \$	250.00
	onot include car payments. ntertainment, clubs, recreation, newspapers, magazines, and books	13. \$	
	naritable contributions and religious donations	14. \$	0.00
	surance.	14. φ	0.00
	surance. o not include insurance deducted from your pay or included in lines 4 or 20.		
	ia. Life insurance	15a. \$	0.00
	b. Health insurance	15b. \$	0.00
15	ic. Vehicle insurance	15c. \$	75.00
	d. Other insurance. Specify:	15d. \$	0.00
	ixes. Do not include taxes deducted from your pay or included in lines 4 or 2		
Sp	pecify:	16. \$	0.00
	stallment or lease payments:	47- ¢	
	'a. Car payments for Vehicle 1	17a. \$	0.00
	b. Car payments for Vehicle 2	17b. \$	0.00
	C. Other Specify:	17c. \$	0.00
	d. Other. Specify:	17d. \$	0.00
	our payments of alimony, maintenance, and support that you did not re educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Forn		0.00
	ther payments you make to support others who do not live with you.	\$	0.00
	pecify:	19.	0.00
	ther real property expenses not included in lines 4 or 5 of this form or		
	a. Mortgages on other property	20a. \$	0.00
20	b. Real estate taxes	20b. \$	0.00
20	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20	e. Homeowner's association or condominium dues	20e. \$	0.00
l. Ot	ther: Specify: tax preparer	21. +\$	20.00
2. Ca	alculate your monthly expenses		
	a. Add lines 4 through 21.	\$	2,964.00
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form	106J-2 \$	· ·
	c. Add line 22a and 22b. The result is your monthly expenses.	\$	2,964.00
	, , ,		,
	alculate your monthly net income. Sa. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2 005 00
	b. Copy your monthly expenses from line 22c above.	23b\$	2,805.00 2,964.00
231	b. Copy your monthly expenses from line 220 above.	۷۵۵۵ 	2,964.00
23	c. Subtract your monthly expenses from your monthly income.	22.	150.00
	The result is your monthly net income.	23c. \$	-159.00
4. D o	you expect an increase or decrease in your expenses within the year	after you file this form?	
For	r example, do you expect to finish paying for your car loan within the year or do you ex		or decrease because of a
	odification to the terms of your mortgage?		
	No.		
	Yes. Explain here:		

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Fill in this	s information to identify your	case:	
Debtor 1	Edward Christian		
DCDIOI 1	First Name	Middle Name Last Name	
Debtor 2	Michelle Ann Mc	luskey	
(Spouse if, fili	ing) First Name	Middle Name Last Name	
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS	
Case num	nber		
(if known)			☐ Check if this is an amended filing
Official	Form 106Dec		
		n Individual Debtor's	s Schedules 12/15
years, or b	ooth. 18 U.S.C. §§ 152, 1341, 1	i19, and 3571.	result in fines up to \$250,000, or imprisonment for up to 20
Did y	you pay or agree to pay some	one who is NOT an attorney to help you f	fill out bankruptcy forms?
	No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	r penalty of perjury, I declare hey are true and correct.	hat I have read the summary and schedu	ules filed with this declaration and
X /s	s/ Edward Christian Mcclu	skev X /s/N	Aichelle Ann Mccluskey
	Edward Christian Mcclusk	y Micl	helle Ann Mccluskey
S	Signature of Debtor 1	Sign	ature of Debtor 2
D	Oate October 10, 2016	Date	October 10, 2016

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		ation to identify you				
De	btor 1	Edward Christia First Name	Middle Name	Last Name		
1	btor 2 ouse if, filing)	Michelle Ann Mo	Ccluskey Middle Name	Last Name		
		kruptcy Court for the:	NORTHERN DISTRICT O			
Un	iled States Bari	kruptcy Court for the.	NORTHERN DISTRICT C	OF ILLINOIS		
	se number				-	Check if this is an imended filing
St		of Financial	Affairs for Individ		ankruptcy equally responsible for sup	4/10
info	rmation. If mo		attach a separate sheet to		y additional pages, write you	
Pa	rt 1: Give De	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	■ Married □ Not marri	ied				
2.	During the las	st 3 years, have you	lived anywhere other than	where you live now?		
	□ No ■ Yes. List	all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Price	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	916 w berkl arlington h	ley drive eights, IL 60004	From-To: 7/2012 - 8/201 4	Same as Debtor	ı	Same as Debtor 1 From-To:
3. stat	es and territorie				ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Mak	e sure vou fill out <i>Sci</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
		•	`	,		
4 .	Did you have Fill in the total	amount of income yo		Ill businesses, including part		ndar years?
	□ No					
	Yes. Fill i	n the details.				
			Debtor 1	One of the same	Debtor 2	Ones las
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$24,443.00
			☐ Operating a business		☐ Operating a business	
Offic	cial Form 107		Statement of Financial Aff	airs for Individuals Filing for B	ankruptcy	page '

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Document Page 40 of 57 **Edward Christian Mccluskey** Debtor 1 Debtor 2 Michelle Ann Mccluskey Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$0.00 \$29,968.64 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$0.00 \$36,734.76 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until social security \$6,643.00 the date you filed for bankruptcy: For last calendar year: social security \$10,388.00 (January 1 to December 31, 2015) For the calendar year before that: social security \$10,175.00 (January 1 to December 31, 2014) \$0.00 pension \$775.00 Unemployment \$316.00 baseball umpire \$2,250.00 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

 \square No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Entered 10/10/16 15:46:43 Case 16-32297 Doc 1 Filed 10/10/16 Desc Main Page 41 of 57 Document **Edward Christian Mccluskey** Debtor 1 Michelle Ann Mccluskey Debtor 2 Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Nature of the case Status of the case

Court or agency

3rd District

Circuit Ct of Cook County

Pending

□ On appeal

□ Concluded

Official Form 107

Case title

Case number

Mccluskey

16 M3 005193

contract

Forst Investors Security v. Michelle

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Der	Michelle Ann Mccluskey	Case number	(If Known)	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details bel	otcy, was any of your property repossessed, foreclosed	I, garnished, attached	I, seized, or levied?
	□ No. Go to line 11.			
	Yes. Fill in the information below.			
	Creditor Name and Address	Describe the Property	Date	Value of the
	or surfer realise and realises	Docume and Freporty	Dato	property
		Explain what happened		
	First Investors Corporation 380 Interstate North Parkway	vehicle 2014	08/19/2015	\$19,791.39
	Atlanta, GA 30339	☐ Property was repossessed.		
		☐ Property was foreclosed.		
		☐ Property was garnished.		
		☐ Property was attached, seized or levied.		
	accounts or refuse to make a payment be ■ No □ Yes. Fill in the details. Creditor Name and Address	Describe the action the creditor took	Date action was	Amount
			taken	
	■ No □ Yes 15: List Certain Gifts and Contributions Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	s uptcy, did you give any gifts with a total value of more t	han \$600 per person′	?
	Gifts with a total value of more than \$600 per person	0 Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
	, tudi 000i			
14.	Within 2 years before you filed for bankru	uptcy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	No No			
	Yes. Fill in the details for each gift or co	ontribution.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	ŕ	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankrup	otcy or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	or gambling?			
	No			
	Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending	Date of your loss	Value of property lost

Debtor 1

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Debtor 1 Edward Christian Mccluskey
Debtor 2 Michelle Ann Mccluskey

Case number (if known)

Par	t 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prepared include any attorneys, bankruptcy petition prepared.	aring a bankruptcy pet	ition?		erty to anyone you
	■ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any prope	or transfer was made	Amount of payment
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors. Do not include any payment or transfer that you	s or to make payments			erty to anyone who
	■ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address	Description and v transferred	alue of any prope	rty Date payment or transfer was made	Amount of payment
18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your include gifts and transfers that you have already listed on this statement. No					
	Yes. Fill in the details.				
	Person Who Received Transfer Address	Description and v property transferr		Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you				
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-protein No		y property to a sel	lf-settled trust or similar device	of which you are a
	☐ Yes. Fill in the details.				
	Name of trust	Description and v	alue of the proper	ty transferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Stora	ge Units	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No Yes. Fill in the details.	other financial accour	nts; certificates of		
		Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, any s	safe deposit box or other depo	sitory for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St		escribe the contents	Do you still have it?

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Debtor 1 Edward Christian Mccluskey
Debtor 2 Michelle Ann Mccluskey

Case number (if known)

22	Have you stored property in a storage unit or pla	ace other than your home within 1	vear before you filed for bankruptcy	?
	_	ioo oino. inan your nome mann .	your bololo you mou lot built uploy	•
	No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for S	Someone Else		
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any proper	rty you borrowed from, are storing for	, or hold in trust
	No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Informa	tion		
For	ne purpose of Part 10, the following definitions a	apply:		
	Environmental law means any federal, state, or laction in the same substances, wastes, or material into the air regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground stances, wastes, or material.	dwater, or other medium, including st	atutes or
_	Site means any location, facility, or property as one own, operate, or utilize it, including disposal s	-	law, whether you now own, operate, o	or utilize it or used
	<i>Hazardous material</i> means anything an environn nazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic s	substance,
Rep	rt all notices, releases, and proceedings that yo	u know about, regardless of wher	n they occurred.	
-			•	omtal lavvO
24.	Has any governmental unit notified you that you	may be hable or potentially hable	e under or in violation of an environme	entai iaw ?
	No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any i	release of hazardous material?		
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	·	ironmental law? Include settlements a	and orders.
	No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Conr	nections to Any Business		
27.	Nithin 4 years before you filed for bankruptcy, d	lid you own a business or have ar	ny of the following connections to any	business?
	☐ A sole proprietor or self-employed in a tr	rade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)	

Entered 10/10/16 15:46:43 Case 16-32297 Doc 1 Filed 10/10/16 Desc Main Page 45 of 57 Document **Edward Christian Mccluskey** Debtor 1 Debtor 2 Michelle Ann Mccluskey Case number (if known) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Edward Christian Mccluskey /s/ Michelle Ann Mccluskey **Edward Christian Mccluskey** Michelle Ann Mccluskey Signature of Debtor 1 Signature of Debtor 2 Date October 10, 2016 Date October 10, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Edward Christian	Mccluskey		
	First Name	Middle Name	Last Name	
Debtor 2	Michelle Ann Mcc	cluskey		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				Charle if this is an
(II KIIOWII)				☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2	Edward Christian Mccluskey Michelle Ann Mccluskey	Case number (if known)	
name:		☐ Retain the property and redeem it.	☐ Yes
		☐ Retain the property and enter into a	
Descrip		Reaffirmation Agreement.	
propert securin		☐ Retain the property and [explain]:	
			-
Part 2:	List Your Unexpired Personal Property Lease	es ed in Schedule G: Executory Contracts and Unexpired	L cases (Official Form 106G) fill
in the info	rmation below. Do not list real estate leases.	Unexpired leases are leases that are still in effect; the if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
	on of leased		_
Property:			☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r	name: on of leased		□ No
Property:	on or leased		☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have indicated hat is subject to an unexpired lease.	my intention about any property of my estate that sec	cures a debt and any personal
	Edward Christian Mccluskey	X /s/ Michelle Ann Mccluskey	
	vard Christian Mccluskey ature of Debtor 1	Michelle Ann Mccluskey Signature of Debtor 2	
Date	October 10, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-32297 Doc 1 Filed 10/10/16 Entered 10/10/16 15:46:43 Desc Main Document Page 52 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

	Edward Christian Mccluskey						
In r	Michelle Ann Mccluskey	Debtor(s)	Case No. Chapter	7			
		Debtor(s)	Chapter				
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	0.00			
	Prior to the filing of this statement I have received			0.00			
	Balance Due			0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	bers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compen- copy of the agreement, together with a list of the na	ames of the people sharing in the	compensation is atta	iched.			
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 						
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.	ee does not include the following ischargeability actions, judi	service: cial lien avoidanc	es, relief from stay actions or			
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in			
_	October 10, 2016	/s/ Robert M. Kap					
Date		Robert M. Kaplan Signature of Attorne					
		Law Offices of Ro	bert M. Kaplan, P	P.C.			
		1535 W. Schauml Suite 204	ourg Road				
		Schaumburg, IL 6	60194				
		(847)895-9151 Fa	ax: (847)895-7320				
		rmkap@sbcgloba Name of law firm	11.11 0 T				

United States Bankruptcy Court Northern District of Illinois

In re	Edward Christian Mccluskey		Case No.		
III IC	Michelle Ann Mccluskey	Debtor(s)	Chapter Chapter	7	
	VE	ERIFICATION OF CREDITOR MA	ATRIX		
		Number of 0	Creditors: _	33	
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of m (our) knowledge.				
Date:	October 10, 2016	/s/ Edward Christian Mccluske Edward Christian Mccluskey Signature of Debtor	у		
Date:	October 10, 2016	/s/ Michelle Ann Mccluskey Michelle Ann Mccluskey			
		Signature of Debtor			

Advanced Radiology Consultants 520 E. 22nd Street Lombard, IL 60148

Advocate Lutheran General Hospital PO Box 4249 Carol Stream, IL 60197

Advocate Lutheran General Hospital PO Box 73208 Chicago, IL 60673

Advocate Medical Group PO Box 92523 Chicago, IL 60675-2523

Alexian Bros Medical Center attn: Billing Dept 800 Biesterfield Elk Grove Village, IL 60007

Alexian Brothers Behavioral Hosp 21272 Network Place Chicago, IL 60673

Alexian Brothers Medical Center 22589 Network Place Chicago, IL 60673

Alexian Brothers Medical Group PO Box 740023 Cincinnati, OH 45274

Alexian Brothers Medical Group 3040 Salt Creek Lane Arlington Heights, IL 60005

Alexian Brothers Medical Group Attn: #5588Y PO Box 14000 Belfast, MO 04915

Ameri Mark Premier PO Box 2845 Monroe, WI 53566 Apex Northwest Healthcare SC 1558 Barrington Road Doctors Building 1, Suite 410 Hoffman Estates, IL 60169

Behavior Healthcare 1375 E Schaumburg Suite 260 Schaumburg, IL 60194

Credit Bureau Centre PO Box 273 Monroe, WI 53566

Credit One Bank PO Box 60500 City of Industry, CA 91716

Credit One Bank c/o Blatt Hasenmiller Leibsker Moor 10 S LaSalle St, Suite 2200 Chicago, IL 60603

Elk Grove Radiology Attn: Billing Dept 800 Biesterfield Elk Grove Village, IL 60007

First Investors Servicing Corp c/o Markoff Law LLC 29 N Wacker Drive, Ste 550 Chicago, IL 60606

Gettington PO Box 166 Newark, NJ 07101

Grandpointe PO Box 8939 Madison, WI 53708

Harris & Harris 111 W. Jackson Blvd. #400 Chicago, IL 60604 Illinois Collection Service PO Box 1010 Tinley Park, IL 60477

Illinois Dept of Revenue Springfield, IL 62726-0001

Malcolm S. Gerard & Assoc, Inc 332 S. Michigan Ave., Suite 600 Chicago, IL 60604

Mason Companies 2700 Meridian Parkway, Suite 200 Durham, NC 27713

Mathers Clinic 145 S Virginia Street Crystal Lake, IL 60014

Mea-Elk Grove, LLC PO Box 740023 Cincinnati, OH 45274

michael galladora
706 e shabonee
mount prospect, IL 60056

Northwest Community Hospital PO Box 95698 Chicago, IL 60694-5698

Professional Recovery Services Inc 221 Laurel Road Suite 160 Voorhees, NJ 08043

State Collection Services PO Box 6250 Madison, WI 53701

Stoneberry PO Box 2820 Monroe, WI 53566 Van Ru Credit Corporation 1350 E. Touhy Des Plaines, IL 60018